

University of Minho –PEANOW PROJECT – MISTREATMENT OF OLDER ADULTS IN ISRAEL (OCTOBER 2009)

# **PEANOW**

## **Prevalence study of Abuse and Violence against Older Women**

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### **Literature review (Israel)**

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### **Abstract**

2 The present paper pretends to identify, describe and compare the prevalence studies of elder abuse and neglect developed in Israel. The research method used international databases and specific keywords to develop the research. Results show the dominance of communitarian setting in elderly abuse and neglect studies and a comprehensive approach to specific populations (Arab-Israeli, Jewish). The results indicate lower levels of prevalence of abuse and neglect (2.5% and 0.5%) when local sample are considered, whereas when the national survey is taken into account, higher prevalence indices of abuse (18%) and even higher of neglect (26%) can be observed. Emotional / psychological abuses, followed by neglect, were the prevalent forms of abuse. All instruments employed were purposely designed for the different studies through research of international literature. In conclusion, several characteristics of the abused elders and perpetrators do encountered what has been found in other developed countries revealing that family is probably the primary setting where elderly abuse and neglect takes place.

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## 1. Introduction

The State of Israel presents a multi-cultural, pluralistic society that includes a variety of national, religious, and ethnic groups; diverse communities such as the kibbutz; new immigrants vs. long-term residents and native-born citizens, Jews and Arabs (Lowenstein & Doron, in press). This mix of modern and traditional values frames the phenomenon of elder abuse and neglect within these different cultures and ethnicity.

Although, still presenting a relatively low aging number, when compared to other developed countries, between its establishment and 2006, the overall population of Israel grew by about 3.5%, whereas the population of older adults grew 7%. In addition, while the number of people aged 65 or more double, the number of people aged 75 or more tripled. It should be noted that although these statistics considered the older adults aged 65 or more, in Israel, women older adult's populations is aged at 60, while men are aged at 65 years (Lowenstein & Doron, in press). Since 1980, the older adults have been brought to the public arena, at the same time that research was being developed, tendency that increased in 1990 (Lowenstein & Doron, in press).

The present paper addresses the issue of elder abuse and neglect in Israel, by reviewing four communitarian studies and one national survey, developed in the country. Firstly, the methods used for the research are described. Following an overview of the definitions and nomenclatures used, the prevalence data is looked at, as well as the variables studied in relation to abuse. Finally, the methodology for collecting the data and the instruments employed in the several studies are address and a conclusion is drown, also by comparing the findings with those retrieved in other developed countries.

## Methods

### 2.1. Databases, descriptors and range of years covered

5 For the purpose of this paper a bibliographic review was carried out in the databases of EBSCOhost, PsyArticles, ProQuest; and also some direct contacts were made with known authors. In all of the databases six descriptors were used, namely: 1) elder abuse; 2) elder maltreatment; 3) domestic violence; 4) family violence; 5) prevalence of elder abuse; and 6) older women abuse. The main criteria were the use of English language and the articles reporting prevalence values. Both quantitative and qualitative studies were considered as well as different methodologies (instruments and methods of administration); different settings (community and institutions) and every forms of abuse. It should, however, be regarded that only studies aiming at communitarian setting were found. Although the range of year's weren't previously decided recent studies were prioritised. Hence, the studies gathered, ranged between 1997 and 2005, even though the majority reported to the 2000 decade.

### 2.2. Definitions adopted

The nomenclature *elder abuse and neglect*, as observed in international literature (Lachs & Pillemer, 2004), appears to be privileged, although *mistreatment* can also be found but not at the same extent. In reality, when employed, mistreatment usually regards the overall acts of abuse and neglect (Saron & Zoabi, 1997; Rabi, 1999). Similarly, most of the studies do not advance specific definitions of elder abuse and neglect, but describe the several forms it can assume (Iecovich, Lankri & Drori, 2005; Iecovich, 2004; Litwin & Zoabi, 2003; Lowenstein & Ron, 1999; Saron & Zoabi, 1997). One definition found regarded the first national survey, where Eisikovits, Winterstein and Lowenstein (2005,

2004) established a broader definition that encompasses a “destructive and offensive behaviour” within a “trusting relationship”, with consequences observed at several levels, “physically and/or psychologically, socially and financially” or even such as “loss or violation of human rights” or “harm to the elder’s quality of life” (Hudson, 1989). This definition encompasses not only the most commonly forms of abuse considered (psychological or emotional, physical abuse, sexual abuse and financial abuse) (Litwin & Zoabi, 2003), but also abandonment and violation of rights. Neglect is defined as intended or unintended refusal or failure to fulfil an elder person’s basic needs (Brandlle & Horan, 2002; in Eisikovits et al., 2005).

Self-neglect was only referenced by Litwin and Zoabi (2003); however its dissimilarity nature regarding the other categorisation makes it difficult to estimate along with the other form of abuse. In reality, in all studies the different forms of abuse considered are regarded as one type of categorization among others, usually, the most commonly employed in international literature and for whom instruments have been developed and evaluated.

### *2.3.Scope of the prevalence of older adults’ abuse in the community*

Seven articles were considered for the purpose of this review, although they represent five studies, as displayed in Table 1. It should be noted that Iecovich (2005) and Iecovich, Lankri & Drori (2005) aim, respectively, at the comparison of the phenomenon between the general population and new immigrants in a metropolitan city and at the prevalence in a metropolitan city in Israel. Both studies appear to result from the same sample, same instruments and the same procedures presenting equal prevalence values regarding total abuse. Nevertheless, the aims described in both studies do differ, as well as the analysis in the social and

demographic characteristics of the abused victims and perpetrators. On the other hand in each article there's no reference to the other article or if constitutes the same study.

Therefore and although in Table 1 they appeared together, they will be reviewed separately.

In fact, excepting the national survey (Eisikovits et al., 2004; Eisikovits, et al., 2005) all studies relate the phenomenon with other particular issue, analyzing more macro social factors, as traditional and moderns contexts (Litwin & Zoabi, 2003; Sharon & Zoabi, 1997), or more individual characteristics (Iecovich, 2005; Iecovich et al., 2005; Lowenstein & Ron, 1999).

All studies were conducted in a communitarian setting. In fact, Lowenstein (1999) refers that they have no of research and data in Israel regarding elder abuse and neglect in institutional setting; tendency that seems to be still relevant nowadays (Lowenstein & Doron, in press). Analysis based on laws, governmental surveillance data, court cases, media clippings, and data from quality of life studies, revealed that the prevalence of the phenomenon, in that setting, is limited when using physical and emotional abuse and neglect (Lowenstein, 1999). However when violation of rights and improper quality of life were considered the phenomenon appeared to be more wide spread (Lowenstein, 1999).

The prevalence of elder abuse is lower than reported in other developed countries, when local research is considered (Iecovich, 2005; Iecovich et al., 2005; Sharon & Zoabi, 1997). However, the findings revealed by the national survey indicate that 18.4% of Israel's older population was exposed to at least one type of abuse and that 26% were subject to neglect (Eisikovits, et al., 2004; Eisikovits, et al., 2005). Nevertheless as observed in the case of institutional setting, the difference in the prevalence values may derive from the fact that contrary to all the other studies here reported, this national survey encompassed more forms of abuse (violation of rights and limitation of freedom).

Neglect and mental/psychological/verbal abuse are generally the two most prevalent forms of abuse. Neglect, although presented in one study as the fourth most common form of abuse (Iecovich, 2005; Iecovich et al., 2005) was found it to be, nationwide, the most widespread (Eisikovits, et al., 2004, Eisikovits, et al., 2005). In addition, Sharon and Zoabi (1997) and Lowenstein and Ron (1999) found it to be the second most common form of abuse. Excepting Lowenstein and Ron (1999) whose small sample type and specific objective may be accountable for the findings, mental/psychological/verbal abuse are clearly the prevailing type of abuse (Eisikovits, et al., 2004, Eisikovits, et al., 2005; Iecovich, 2005; Iecovich et al., 2005; Litwin & Zoabi, 2003; Sharon & Zoabi, 1997). Finally, financial/material abuse prevailed physical abuse, except in one study (Iecovich, 2005; Iecovich et al., 2005).

#### *2.4. What is abuse associated with?*

Regarding the variables associated with abuse and neglect, table 2 displays the older adults abused social-demographic characteristics, analysed regarding their significant mean differences or their capacity to predict the prevalence of the phenomenon.

The women population emerged as vulnerable group and gender did in fact, constitute a risk factor. Arab women were even more mistreated nationwide in particularly regarding limitation of freedom (Eisikovits et al., 2004; Eisikovits et al., 2005), fact also substantiated in Sharon and Zoabi (1997) were the majority of prevalence victims in 55 Arab communities were women (69.4%).

In general, age and health, were found to be strong variables predicting abuse; hence being between 60 and 75 years old (compared to older subjects) and having a bad health explains, respectively, some variance in physical, mental abuse, limitation of freedom and



overall abuse and neglect (Eisikovits et al., 2004; Eisikovits et al., 2005; Iecovich, 2005 ; Iecovich et al., 2005). Not having cognitive impairment predicted physical and mental abuse and neglect (Iecovich, 2005).

Regarding marital status the results indicate, excepting Iecovich et al. (2005), being married can explain some of the variance of verbal/mental, physical and economic abuse (Eisikovits et al., 2004; Eisikovits et al., 2005; Iecovich, 2005). In addition, Lowenstein and Ron (1999) examined elder abuse within twelve remarried couples and found that the factors underneath abuse and neglect (as presented by the participants) were similar (except “memories of the first spouse”), to those found in spouse abuse in early age, namely, financial arrangements, issues of power and control.

Table 1 Studies reviewed by sample, objectives, setting and prevalence values

	Sample and Participants	Objectives	Setting	Prevalence (%)
Sharon & Zoabi, 1997	128 professionals providing direct services to older adults in 55 Arab communities	Scope and nature of elder abuse and neglect in one traditional group currently undergoing change: the Arabs in Israel.	Communitarian	<b>2.5%</b> (434 cases of 16.000 older adults) Primary abuse: 66.8% psychological abuse; 18.4% neglect; 11.3% material abuse and 3.5% physical abuse. Secondary abuse: 34.7% material abuse; 32.8% neglect, 32.1% physical abuse and 0.4% psychological abuse Third abuse: 68% material abuse
Lowenstein & Ron, 1999	12 Remarried couples	Reasons and risk factors for the phenomenon of abuse by elderly partners in second marriage	Communitarian	All the respondents had been identified as victims of abuse by their present spouses. Only one reported being abused by her previous (deceased) husband. 66% Financial exploitation 33% Neglect 33% Physical violence 25% Psychological abuse
Litwin & Zoabi, 2003	120 Arab-Israeli older adults victims of abuse	Indicators of modernization (urbanization [community type] and social isolation [social network]) in relation to elder abuse among Arab-Israelis	Communitarian	All of the respondents had been identified as victims of abuse. 83.3% Psychological and material abuse and neglect 16.7% Physical abuse
Eisikovits, et al., 2004, 2005	1045 Older adults	Prevalence of elder abuse and neglect in Israel	Communitarian	<b>18.4%</b> were abused <b>26%</b> were neglected in meeting both primary needs and secondary needs; neglect in meeting primary needs was about 18%. 14.2% Verbal abuse 6.6% Financial exploitation 2.7% Limitation of freedom 2% Physical and sexual abuse 8% reported verbal abuse along with additional types of maltreatment
Iecovich, 2005 and Iecovich et al., 2005	* Jewish older adults from a southern district constituting 24,800 of the total population	Prevalence of elder abuse and neglect in a metropolitan city in Israel: - comparison of new immigrants (arriving at 15 years or less in Israel) with the general elderly population; - characterization of the victims and their perpetrators; and major pathologic family problems diagnosed in the victims' families	Communitarian	<b>0.5%</b> (120 new cases of abuse and neglect were validated) 65.8% Mental abuse 59.3% Physical abuse 40% Economic/material abuse 23.3% Neglect Two cases of sexual abuse

Notes: \* The sample results from all the abuse cases identified by professionals working with this population

Table 2 Social and demographic characteristics of older adults abused

	Litwin & Zoabi, 2003	Eisikovits et al., 2004, 2005	Iecovich, 2005	Iecovich et al., 2005
Population, ethnic and nationality background	120 Arab-Israeli older adults victims of abuse and a control group consisting in 120 Arab-Israeli non-abuse older adults	National representative sample of 1045 older adults with proportionate number of elder men and women and of Arab and Jewish persons Jewish nationality predicted significantly verbal abuse and neglect	Jewish general population and new immigrants in capital city in the Southern District. Being a new immigrant predicted physical abuse (OR= .29, b = 1.25, SE = .60, $p = .01$ ) and neglect (OR= .26, b = 1.33, SE = .66, $p = .05$ )	Jewish general population and new immigrants in capital city in the Southern District. Those born in European countries experienced more physical abuse and neglect Those born in Asian-African countries experienced more mental and economic abuse.
Age	The control group was younger ( $\bar{x} = 74.0$ , $SD = 7.5$ ) than the study group ( $\bar{x} = 76.9$ , $SD = 8.5$ )	Being a younger (60 -75) women predicted overall abuse and limitation of freedom	Being younger (60-75) predicted physical abuse (OR= .92, b = .08, SE= .04, $p = .01$ )	Older adults between 60 and 74 years old, compared to older subjects, experienced more physical and mental abuse Older adults aged 75 and over, compared to those younger experienced more economic abuse and neglect
Gender	*	Women were mostly overall mistreated and particularly more physical and sexually abused than men. Arab women were the most vulnerable to abuse and particularly to limitation of freedom	Women were in both groups (general victims as in the new immigrants victims) significantly more abused	Being a women predicted overall abuse and neglect
Marital Status	The control group was less frequently (57%) widowed, separated, or divorced than the study group (77%)	Being married predict significantly verbal abuse Women subjected to abuse were married for longer periods of time Being a married men or being a married women predicted limitation of freedom	Being married predicted physical abuse (OR= 6.36, b = 1.85, SE = .65, $p = .01$ ), mental abuse (OR= 15.48, b = 2.74, SE = .78, $p = .001$ ) and economic abuse (OR= .08, b = 2.57, SE = .72, $p = .001$ )	Being unmarried predicted overall abuse and neglect
Education	–	Women subjected to abuse or to limitation of freedom were less educated	–	–
Socio-economic status	–	Low level of income predicted significantly verbal abuse Low level of income in the women population predicted significantly physical and sexual abuse Need for financial help predicted significantly neglect	–	–
Health problems	–	Impaired health predicted significantly abuse and neglect Bad health in men predicted significantly physical and sexual abuse Bad health in women predicted limitation of freedom	Both in general victims as in the new immigrants victims group the majority were functionally disabled people Not having cognitive impairment predicted physical abuse (OR= 3.45, b = 1.24, SE = .65, $p = .05$ ) mental abuse (OR= 3.23, b = 1.44, SE = .60, $p = .05$ ) and neglect (OR= .08, b = 2.57, SE = .72, $p = .05$ )	Having some sort of physical fragility predicted overall abuse and neglect

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Usage of medical services	–	Less usage of medical services predicted significantly verbal abuse and neglect	–	
Living arrangements	–	Women subjected to abuse had larger number of people living in the household	Not owning their home predicted physical abuse (OR= .24, b = 1.44, SE = .60, $p = .05$ ).	Living with others predicted overall abuse and neglect
Having family problems			Having family problems predicted economic abuse (OR= 4.09, b = 1.41, SE = .53, $p = .01$ )	Conflictual family problems prevailed in overall abuse and neglect
Network size	The control group living in the cities ( $\bar{x} = 14.64$ ) had the largest network, while the study group living in cities had the smallest ( $\bar{x} = 4.83$ ), $F(1, 234) = 1340.84$ , $p < .001$ . Within the study group those residing in cities ( $\bar{x} = 4.15$ ) had significantly smaller networks than those residing in towns ( $\bar{x} = 5.05$ ) and villages ( $\bar{x} = 5.88$ ), $F(2, 234) = 9.02$ , $p < .001$ .	–	–	–
Frequency of contact with social network	The control group had higher frequent contact with their social networks ( $\bar{x} = 3.66$ ) than did the study group ( $\bar{x} = 3.05$ )	–	–	–
Supportiveness of social network	The control group had more support ( $\bar{x} = 4.16$ ) than did the study group ( $\bar{x} = 2.65$ ), $F(1, 234) = 269.24$ , $p < .001$ . Within the abused group, network supportiveness was also lowest in the cities ( $\bar{x} = 2.28$ ) than in villages ( $\bar{x} = 2.77$ ) or towns ( $\bar{x} = 3.05$ ), $F(2, 234) = 7.45$ , $p < .01$ .	–	–	–
Number of network members providing assistance in routine tasks of daily living	Both groups were less assisted in the network by the children ( $\bar{x} = 2.56$ , $F(5, 234) = 47.12$ , $p < .001$ ) rather than other member ( $\bar{x} = 3.81$ , $F(5, 234) = 72.52$ , $p < .001$ ) The study group has a less number of people, whether network members in general ( $\bar{x} = .73$ , $F(1, 234) = 326.98$ , $p < .001$ ) or children (mean = .44, $F(1, 234) = 212.82$ , $p < .001$ ) providing assistance compared to the control group The village residents were in both groups those with the lowest number of network members ( $\bar{x} = 2.54$ , $F(2, 234) = 7.54$ , $p < .01$ ) and children ( $\bar{x} = 1.50$ , $F(2, 234) = 7.51$ , $p < .01$ ) providing assistance in routine tasks of daily living.	–	–	–

Notes: \* No significant differences are found or reported

- Data not reported

Other variables had differently outcomes or weren't considered significant in the studies. Low level of income, less usage of medical services predicted verbal abuse and neglect, which also correlated with living with others and need for financial support (Eisikovits et al., 2004; Eisekovits et al., 2005; Iecovich et al., 2005). Physical abuse was predicted by not owning ones home (Iecovich et al., 2005). Family problems predicted overall abuse and neglect (Iecovich, 2005) and economic abuse (Iecovich et al., 2005).

Macro social variables and contextual factors, such as modernization, have been argue to affect the role of the elderly and to contribute to the decline of their social status (Hendricks & Hendricks, 1986; in Sharon & Zoabi, 1997). In that sense, Sharon and Zoabi (1997) observed that prevalence of abuse among Arabs aged 65 and over, residing in the Northern region of Israel was higher in urban areas, somewhat lower in suburban areas, and even lowest in isolated villages. In addition, Litwin and Zoabi (2003) observed that abused and neglected elder residing in cities had smallest network of social support and the lowest supportiveness from that network, either compared with control group or other members of the study group residing in towns or villages; curiously, village residents were generally those with the lowest number of network members and children providing assistance in routine tasks of daily living. These results may lend some support to modernization theory as an explanation of elder abuse.

### *2.5. Who were the perpetrators?*

The perpetrators characteristics (Table 3) are regarded in three studies (Eisikovits et al., 2004; Eisikovits et al., 2005; Iecovich et al., 2005; Sharon & Zoabi, 1997). The national survey found that most of the perpetrators were spouses and children only prevailed regarding financial abuse (Eisikovits et al., 2004; Eisikovits et al., 2005). When the perpetrators were partners they had more chronic health problems, physical disabilities,

dementia, and emotional problems, whereas when they were adult children most lived with the victims, were unemployed, had various mental health and substance abuse problems, and were often separated or divorced.

On the other hand three other studies found adult sons to be the majority of the perpetrators, followed by the daughters-in-law, usually married, receiving low incomes, unstable employed or having financial problems (Iecovich et al., 2005; Litwin & Zoabi, 2003; Sharon & Zoabi, 1997).

#### *2.6. Who were the participants of the studies?*

Table 4, where the methodology for collecting data is synthesized, reveals a common method for data collection. Professionals working directly with older adults (social workers, nurses, care providers and other paraprofessionals) through revising their cases or reporting new ones, provide the sample and prevalence in a specific community. In fact both Sharon and Zoabi (1997) and Iecovich et al., (2005) considered all the institutions in a specific area and therefore the prevalence was considered representative of the older adult's population in the community where abuse takes place. It is, however, the study of Litwin and Zoabi (2003) that most approximate the experimental design, since a multistage sampling is undertaken and a control group is formed. In addition, Lowenstein and Ron (1999) did gather their data from a sample that had already been selected for a previous abuse and neglect pilot study also through identification of abuse and neglect by welfare professionals. The only exception was the national survey, aiming to determine epidemiology of the phenomenon in Israel; hence employing a representative sample of older adults (Eisikovits et al., 2004; Eisikovits et al., 2005).

Table 3 Perpetrators characteristics

		Sharon & Zoabi, 1997		Litwin & Zoabi, 2003	Eisikovits et al., 2004, 2005	Iecovich et al., 2005
		First perpetrators	Second perpetrators			
Relation with the victim	Spouse	–	–	–	Most perpetrators of physical, sexual abuse and limitation of freedom	26.7%
	Children	41.5% were sons	45.5% were sons and	Most of the perpetrators were sons	Most of perpetrators of financial abuse	33.3% were sons 11.7% were daughters
	Other relative	22.8% were daughter-in-law	32% were daughter-in-law	–	–	25% were daughter- or son-in-law
	Non relative	–	–	–	–	3.3% weren't relatives
Age		77.2% (30-54)	83.2% (30-54)	–	–	–
Gender		–	–	–	Daughters, perpetrators of verbal abuse Men, perpetrators of neglect	75.6% were men, although women were associated with neglect
Marital status		83.6% were married	80.3% were married	–	–	Most perpetrators of physical and mental abuse and neglect were married Most perpetrators of economic and sexual abuse weren't married
Problems	Income	49.5% poverty	–	–	Most children, perpetrators of verbal and financial abuse were unemployed	–
	Mental illness	15% had mental illness and/or drug addiction predicted physical abuse		–	Most spouses, perpetrators of physical abuse suffered mental problems and dementia	–
	Drug addiction				Most children, perpetrators of physical and financial abuse and some perpetrators of verbal abuse suffered alcohol or drug addiction	
	Family conflicts	20%	–	–	Most children, perpetrators of physical and verbal abuse were either separated or divorced	–
Cohabitation with the victim		45.5%	44.5%	–	Most spouses and children perpetrators of physical abuse and spouses perpetrators of verbal abuse	–
Income		36.3% of women were housewives and 34.6% of men unstable employed	44% of women were housewives and 33.1% of men were unstable employed	–	Children, perpetrators of physical abuse were mostly unemployed	–

Notes \_ Data not reported

No response rate was reported except in Sharon and Zoabi (1997) where two rural departments of human services covering 13 smaller villages declined to participate in the study. Iecovich et al. (2005) refers, however, that some of the participants refused to answer certain questions, particularly those regarding perpetrators' characteristics.

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Although no exclusive or inclusive criteria are elicited, age is implied. The older adults are considered in the men population to be 65 years or more, while women where 60 years or more. Litwin and Zoabi (2003) used the age rank usually referred in the international literature of 65 years or more. Other criteria such as the ethnic background, impaired physical activity or marital status derived from each specific study objective.

#### *2.7. What measures were used?*

Regarding the instruments, most consisted in questionnaires in form of interviews. In fact, only Lowenstein and Ron (1999) used a more qualitative method by conducting a semi-structured interview guide.

Except Sharon and Zoabi (1997) and the national survey, after the professional's identification of older adults abused and neglected, face to face interviews were undertaken by trainee researches. Usually, this interview consists in a second employed instrument, since the professionals were also asked to complete a questionnaire where the suspicion of abuse and neglect is addressed. Such questionnaires were designed for the study purpose, although they may include other known instruments in this research area.

The main instruments for data collection were developed based on research literature in the area of elder abuse and neglect, as in Iecovich (2005) and Iecovich et al. (2005) (Lau and Kosberg 1979; Pierce and Trotta 1986; Pillemer and Wolf 1986); in Litwin and Zoabi



(2003) (Pierce and Trotta 1986; Pillemer and Wolf 1986) and in Sharon and Zoabi (1997)

(Wolf & Pillemer, 1989; Fulmer, Street & Carr, 1987); generally, encompassing information

Table 4 Methodology of the studies by sample, participants, sampling, procedures and instruments

	Sample	Participants	Sampling	Procedures	Instruments
Sharon & Zoabi, 1997	N = 128	Professionals: 66.4% social workers from government offices; 17.2% nurses; 14.1% paraprofessionals and 2.3% social workers in hospitals	Multistage sampling procedure was undertaken. 31 agencies that provide direct services to the entire Arab elderly community in northern of the country were contacted: 18 public departments of human services, 5 non-profit that provide home base care, 4 hospitals and 4 branch offices of the national Insurance Institute Governmental.	On-site orientations were given regarding the objectives of the study The professional workers review their reports and complete the questionnaires reporting abuse and neglect from cases dating back 18 months.	<ul style="list-style-type: none"> <li>Questionnaire developed for the study <ul style="list-style-type: none"> <li>38 items regarding characteristics of the a) case b) abused older adult and c) alleged perpetrators and d) data related the reporting worker.</li> </ul> </li> <li>A twelve Likert scale assessed the workers attitudes toward older adults and elder abuse</li> </ul>
Lowenstein & Ron, 1999	N = 12 CG = 7	Remarried couples, where abuse had been identified <ul style="list-style-type: none"> <li>Widowers</li> <li>One of spouses was limited in Activities of Daily Living (ADL)</li> </ul>	The selection was made within a pilot study on elder abuse by family members (N = 270). The control group was selected within the same welfare and health professionals that had identified the abused older adults in the pilot study	All respondents were interviewed individually in their homes by the same interviewer. Interviews lasted 1/2 hours and were tape-recorded.	<ul style="list-style-type: none"> <li>Instruments developed for the study. <ul style="list-style-type: none"> <li>Demographic questionnaire</li> <li>Semi-structured interview guide, whose answers were coded. The inter rater reliability revealed a kappa coefficient ranging from .78 to .90.</li> </ul> </li> </ul>
Litwin & Zoabi, 2003	N = 120 CG = 120	Arab-Israeli older adults' victims of abuse Arab-Israeli non-abuse older adults <ul style="list-style-type: none"> <li>65 years or older</li> <li>Low socioeconomic status</li> <li>Perceived need for social assistance</li> </ul>	Communities were categorized: cities, towns, and villages and a semi random basis selected the different communities. Professionals from the social welfare bureaus identified the older adults: a) that received social services due to abuse during the previous 18 months and b) the non-abuse older adult	The instrument was applied privately either in the older adults homes or in social day centers that they attended and was conducted by trained social workers experienced in working with older people with various social difficulties and whose mother tongue was Arabic.	<ul style="list-style-type: none"> <li>Structured questionnaire that had been pretested and modified for use with this study population, which queried matters of social relations and did not address issues of abuse, by design.</li> <li>The Norbeck Social Support Questionnaire ([NSSQ] Norbeck, Lindsey, &amp; Carrieri, 1981).</li> </ul>
Eisikovits et al., 2004 and Eisikovits et al., 2005	N = 1045	Older adults from a representative sample of urban dwellers corresponding proportionate number of men and women and proportionately Arab and Jewish <ul style="list-style-type: none"> <li>Males above the age of 65 and females 60 and older</li> </ul>	Multi-level structured sample by clusters and layers	Face to face interviews by trained interviewees at the informant's place of residence. No other people were present during individual interviews.	<ul style="list-style-type: none"> <li>Instrument developed for the survey: a) socio-demographic; c) health status; d) Activities of Daily Living (ADL); e) sense of safety; f) family mapping and measures of attitudes toward older adults</li> <li>Intention to React To Agression ([RTA] Winstok &amp; Enosh, 2004)</li> <li>Revised Conflict Tactics Scales ([CTS2], Straus et al., 1979) (physical abuse, verbal/psychological abuse, restriction of freedom and sexual abuse)</li> <li>Financial exploitation measure (9 items).</li> <li>Neglect (help need and provided in five items of Activities in Daily Living [ADL])</li> </ul>
Iecovich, 2005 and Iecovich et al., 2005	* The Jewish elderly population (from a district that encompasses approximately 24,800 elderly persons <ul style="list-style-type: none"> <li>Males above the age of 65 and females 60 and older</li> </ul>		Within the framework of a pilot project (aimed at coping with the phenomenon of elderly abuse and neglect), a series of meetings were conducted with service providers; where a systematic procedure of referral to the local Social Service Center for Elderly Persons of persons suspected of being abused or/and neglected was insured.	Data collection was conducted over a 1-year period (December 2001 to December 2002): a) professionals and paraprofessionals complete a short questionnaire, when suspicion of abuse existed and b) trained social workers conducted home visits and employed a questionnaire with the suspected victim	<ul style="list-style-type: none"> <li>First short questionnaire: a) information about the older person and b) open question regarding the reasons why there was a suspicion of abuse or neglect.</li> <li>Questionnaire addressed at the older adults suspected of being abused: a) demographic information; b) health status (medical records at the community clinic) c) formal and informal assistance provided and d) abuse and neglect</li> <li>Mini Mental Test (Folstein, 1983)</li> <li>Activities of Daily Living (ADL)</li> </ul>

Notes: \* The sample results from all the abuse cases (120) identified in this population

regarding the characteristics of the abuse and neglect, social and demographic and health status characteristics of the older adult and the perpetrator.

For the national survey the “Intention to React To Agression” ([RTA] Winstok & Enosh, 2004) and the “Revised Conflict Tactics Scales” ([CTS2], Straus et al., 1979) were employed. However, the latest, addressing abuse, only considers physical abuse, verbal/psychological abuse, restriction of freedom and sexual abuse (Eisikovits et al., 2004; Eisikovits et al., 2005). Hence, for financial exploitation a nine items measure was designed and for neglect the discrepancy between the help reported to be needed and the one provided was considered through five items of Activities in Daily Living (ADL).

The “Norbeck Social Support Questionnaire” (NSSQ) (Norbeck, Lindsey, and Carrieri 1981) in Litwin and Zoabi (2003) permitted the authors to compare the modernization as residency areas and the network of older adults abused with non-abused. This instrument addresses the number of people in the social network and the different kinds of emotional, instrumental, and affirmational support provided by them; the frequency of contact as well as duration of acquaintance and other measures (Litwin & Zoabi, 2003).

Finally, in what regards the reliability of the instruments, only the value in Lowenstein and Ron (1999) is reported indicating a kappa coefficient ranging from .78 to .90.

### **3. Conclusion**

Israel presents specific cultural and contextual factors that could forecast differences not only regarding the prevalence of abuse and neglect, but also its dynamics; this

specificity appears to be taken into account because studies have as targets different ethnic populations and contexts.

Nevertheless, although data from local samples situate the prevalence of abuse and neglect in a lowest level (2.5% and 0.5%), it should be regarded that usually they are not representative of the older population on a national scale and, on the other hand, that the national survey situated abuse and neglect at much higher levels (18% abuse and 26% neglect) (Eisikovits et al., 2004; Eisikovits et al., 2005).

Moreover the main results regarding characteristics of older adult victims and the their perpetrators do approximate those found in international literature (Marmolejo, 2008; Lachs and Pillemer, 2004; Pillemer and Finkelhor, 1989), even in such specific sample as the Arab population (Sharon and Zoabi, 1997). Firstly, the prevalent types of abuse are, generally, emotional abuse and neglect. Secondly, some variables appear to indicate more vulnerability to abuse and neglect: to be woman, having between 60 and 75 and some sort of health problem. And thirdly, the perpetrators were found to be mostly the male adult children or spouse, indicating the domestic setting as the more problematic. When they are adult children, they, often, present income/financial problems and some sort of mental or drug problem.

Finally, it seems they act accordingly more broader definitions of abuse, including violation of rights and inequality of care and this could provide higher prevalence values both in institutional as in the communitarian setting (Lowenstein, 1999; Eisikovits et al., 2004; Eisikovits et al., 2005).

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